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CONFIRMATION NO. 6605

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|---|---|--|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/571,466  | <b>FILING OR 371(c) DATE</b><br>08/25/2006<br><b>RULE</b>   | <b>CLASS</b><br>514                    | <b>GROUP ART UNIT</b><br>1614   | <b>ATTORNEY DOCKET NO.</b><br>285616US0PCT |                                |
| <b>APPLICANTS</b><br>Thomas Rueckle, Plan-les-Ouates, SWITZERLAND;<br>Pierre-Alain Vitte, Cranves-Sales, FRANCE;<br>Jean-Pierre Gotteland, Beaumont, FRANCE;  |   |  |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP04/52143 09/13/2004   |   |  |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>EUROPEAN PATENT OFFICE (EPO) 03102742.8 09/12/2003  |   |  |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/14/2006</b>  |   |  |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <u>                    </u><br>Examiner's Signature <u>                    </u> Initials <u>VEW</u> |   | <b>STATE OR COUNTRY</b><br>SWITZERLAND | <b>SHEETS DRAWING</b><br>0  | <b>TOTAL CLAIMS</b><br>29                  | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>22850   |   |  |   |  |                                |
| <b>TITLE</b><br>Sulfonamide derivatives for the treatment of diabetes   |   |  |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1730  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |